

HAWAII STATE ETHICS COMMISSION

DISCLOSURE OF FINANCIAL INTERESTS (SHORT FORM)

NAME (Last, First, Middle) Ige, David Yutaka	STATE POSITION HELD: (Dept/Div or Board/Commission) Legislature TERM OF OFFICE (Begin/End): 11/02/03 / 11/04/04
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Check either number 1 or 2. If you check number 2, provide the relevant information.

1. ☐ I HAVE NO CHANGES TO REPORT SINCE MY LAST FILING

2. ☒ I HAVE THE FOLLOWING CHANGES TO REPORT SINCE MY LAST FILING.

FOR EACH ITEM, DISCLOSE ADDITIONS, DELETIONS, OR CHANGES IN INTERESTS OF FILER, SPOUSE AND DEPENDENT CHILDREN. USE THE ABBREVIATIONS: "F" for filer, "SP" for spouse, "DC" for dependent children, and "JT" for joint interests of the spouse and filer. Use "A" for any additions in interests, "D" for any deletions, and "C" for any other changes.

<u>F, SP, DC, JT</u> JT	<u>A, D, C</u> A	<u>ITEM # 2</u> Verizon 1177 Bishop Street, Honolulu HI 96813 Nature of Business: Telecommunications; Nature of Interest: Dividend Income Value: B
<u>F, SP, DC, JT</u> JT	<u>A, D, C</u> D	<u>ITEM # 2</u> GTE Common Stock
<u>F, SP, DC, JT</u> JT	<u>A, D, C</u> D	<u>ITEM # 2</u> Hawaii Tel Employees FCU Credit Union
<u>F, SP, DC, JT</u> JT	<u>A, D, C</u> D	<u>ITEM # 4</u> Bank of America

<u>F, SP, DC, JT</u> JT	<u>A, D, C</u> A	<u>ITEM # 4</u> Wells Fargo Home Mortgage P.O. Box 54107 Los Angeles, CA 90054 Original Amount Owed: H Original Amount Outstanding: H
<u>F, SP, DC, JT</u> F	<u>A, D, C</u> D	<u>ITEM # 5</u> Pacific Space
<u>F, SP, DC, JT</u>	<u>A, D, C</u>	<u>ITEM #</u>
<u>F, SP, DC, JT</u>	<u>A, D, C</u>	<u>ITEM #</u>
<u>F, SP, DC, JT</u>	<u>A, D, C</u>	<u>ITEM #</u>
<u>F, SP, DC, JT</u>	<u>A, D, C</u>	<u>ITEM #</u>
<u>F, SP, DC, JT</u>	<u>A, D, C</u>	<u>ITEM #</u>

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STATE OF HAWAII
STATE ETHICS COMMISSION

CERTIFICATION: I have reviewed my previous Disclosure of Financial Interests Statements filed with the Hawaii State Ethics Commission and all succeeding amendments. I hereby certify that the above is a true, correct, and complete statement to the best of my knowledge and belief of my currently reportable financial interests and that there have been no other changes in my reportable financial interests since my prior reports were filed. If I have a spouse and/or dependent children, I also hereby certify that I have included their interests on this form to the best of my knowledge and belief. I understand that it is a violation of State law, chapter 84, HRS, if information is not disclosed as required by chapter 84, HRS. I further understand that there are statutory penalties for noncompliance.


SIGNATURE (Note: This filing is not valid without a signature.)

5/30/2003
DATE